## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

**Application or Docket Number** 

PF -04M-2

| Claims as filed - part i  |  |   |                 |                               |                              |   | SMALL ENTITY |              |                        | OTHER THAN      |            |   |  |  |  |  |  |
|---|--|---|-----------------|-------------------------------|------------------------------|---|--------------|--------------|------------------------|-----------------|------------|---|--|--|--|--|--|
|   |  |   | (Column 1)      |                               | (Column 2)                   |   |              | TYPE         |                        | OR              |            |   |  |  |  |  |  |
| TOTAL CLAIMS  |  |   | .23             |                               |                              |   | F            | ATE          | FEE                    |                 | RATE       | FEE   |  |  |  |  |  |
| FOR   |  |   | NUMBER FILED    |                               | NUMBER EXTRA                 |   | ВА           | SIC FEE      | 355.00                 | OR              | BASIC FEE  | 710.00  |  |  |  |  |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | √2 minus 20=    |                               | • 3                          |   | ×            | (\$ 9=       | -                      | OR              | X\$18=     | 54  |  |  |  |  |  |
| INDEPENDENT CLAIMS  |  |   |                 |                               |                              |   | >            | <b>(</b> 40= |                        | OR              | X80=       | ,   |  |  |  |  |  |
| MU  | LTIPLE DEPEN   | DENT CLAIM P                              | RESENT          |                               |                              |   |              | 135=         |                        | OR              | +270=      |   |  |  |  |  |  |
| * If  | the difference                                       | in column 1 is                            | less than ze    | ro, ente                      | r "0" in c                   | " in column 2   |              | OTAL         |                        | OR              | TOTAL      | 74  |  |  |  |  |  |
| Claims as amended - Part II   |  |   |                 |                               |                              |   |              |              | ( <u>v=</u>            | ,               | OTHER      | THAN  |  |  |  |  |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                 |                               |                              |   |              | WALL         | ENTITY                 | OR SMALL ENTITY |            |   |  |  |  |  |  |
| AWENDWENT A   | and the second                                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA  | F            | ATE          | ADDI-<br>TIONAL<br>FEE |                 | RATE       | ADDI-<br>TIONAL<br>FEE                        |  |  |  |  |  |
|   | Total  | *   | Minus           | **                            |                              | =   | X            | \$ 9=        | ,                      | OR              | X\$18=     |   |  |  |  |  |  |
|   | Independent  | * NTATION OF M                            | Minus           |                               |                              | =   | >            | (40=         |                        | OR              | X80=       |   |  |  |  |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                 |                               |                              |   |              | 135=         |                        | OR              | +270=      |   |  |  |  |  |  |
| TOTAL ADDIT. FEE  |  |   |                 |                               |                              |   |              |              |                        | or '            | TOTAL      |   |  |  |  |  |  |
|   |  | (Calumn 4)                                |                 | (Calu                         | O\                           | (Calumn 0)  | ADD          | 11. FEE (    |                        | ]               | ADDIT. FEE |   |  |  |  |  |  |
|   | 1  | (Column 1)                                |                 | (Colu                         | HEST                         | (Column 3)  | <u></u>      | <del></del>  |                        | ı r             |            |   |  |  |  |  |  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |                 |                               | IBER<br>OUSLY                | PRESENT<br>EXTRA  | F            | ATE          | ADDI-<br>TIONAL<br>FEE |                 | RATE       | ADDI-<br>TIONAL<br>FEE                        |  |  |  |  |  |
|   | Total  | *   | Minus           | **                            |                              | =   | X            | \$ 9=        |                        | OR              | X\$18=     |   |  |  |  |  |  |
|   | Independent  | NITATION OF M                             | Minus           | ***                           | CLAIM                        | <u>                                     </u>  | ×            | 40=          |                        | OR              | X80=       |   |  |  |  |  |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                 |                               |                              |   |              | 135=         |                        | OR              | +270=      |   |  |  |  |  |  |
| TOTAL ADDIT. FEE  |  |   |                 |                               |                              |   |              |              |                        | OR              | TOTAL      |   |  |  |  |  |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                 |                               |                              |   |              |              |                        | 1 =             | ADDIT. FEE | <u>(                                     </u> |  |  |  |  |  |
| AMENDMENT C   | A Company  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA  | R            | ATE          | ADDI-<br>TIONAL<br>FEE |                 | RATE       | ADDI-<br>TIONAL<br>FEE                        |  |  |  |  |  |
|   | Total  | *   | Minus           | **                            |                              | =   | X            | \$ 9=        |                        | OR              | X\$18=     | ï   |  |  |  |  |  |
|   | Independent  | *   | Minus           | ***                           | T C! AIN                     | =   | X            | 40=          |                        | OR              | X80=       |   |  |  |  |  |  |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= |   |                 |                               |                              |   |              |              |                        |                 | +270=      |   |  |  |  |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                 |                               |                              |   |              |              |                        | OR              | TOTAL      |   |  |  |  |  |  |
|   | *If the "Highest Nu                                  | ımber Previously P                        | aid For" IN THI | S SPACE                       | is less tha                  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |              |              |                        |                 |            |   |  |  |  |  |  |